



Application Data Sheet

Application Information

Application Number::	10/587,211
Filing Date::	July 25, 2006
Application Type::	National Phase
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	0
Number of copies of CDs::	0
Sequence submission?::	No
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	MULTI-SOCKET ASSEMBLY
Attorney Docket Number::	27571U
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	5
Small Entity?::	Yes
Latin name::	

Variety denomination name::

Petition included?:: No

Petition Type:: N/a

Licensed U.S. Govt. Agency:: N/a

Contract or Grant Numbers:: N/a

Secrecy Order in Parent Appl.?:: No

Applicant Information (1)

Applicant Authority type:: Inventor

Primary Citizenship Country:: IL

Status:: Full Capacity

Given Name:: Noa

Middle Name::

Family Name:: HASID

Name Suffix::

City of Residence:: Shoham

State or Province of Residence::

Country of Residence:: IL

Street of Mailing address:: 36 Modi'yim St

City of mailing address:: Shoham

State/Province of mailing address::

Country of mailing address:: IL

Postal Code of mailing address:: 73142

Correspondence Information

Correspondence Customer Number:: 20529

Name:: THE NATH LAW GROUP

Street of mailing address:: 112 S. West Street

City of mailing address:: Alexandria

State or Province of mailing address:: Virginia

Country of mailing address:: United States of America

Postal or Zip Code of mailing address:: 22314

Phone number:: (703) 548-6284

Fax number:: (703) 683-8396

E-Mail address:: ip@nathlaw.com

Representative Information

Representative Customer Number::	20529
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date (MM/DD/YY) ::
This Application	National Stage of	PCT/IL2005/000071	01/20/05
PCT/IL2005/000071	An application claiming the benefit under 35 USC 119(e)	60/538,474	01/26/04

Foreign Priority Information

Country::	Application Number::	Filing Date:: (MM/DD/YY)	Priority Claimed::

Assignee Information (1)

Assignee name::

Street of mailing address::

City of mailing address::

State/Province of mailing address::

Country of mailing address::

Postal Code of mailing address::

Signature

Signature::

First Name::

Susanne M.

Last Name::

Hopkins

Registration No.: 33,247

Date (MM/DD/YY): 04/ 16 /09